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## \*BIBDATASHEET\*

Bib Data Sheet

CONFIRMATION NO. 4795

<b>SERIAL NUMBER</b> 10/057,022	<b>FILING OR 371(c) DATE</b> 01/25/2002 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3762	<b>ATTORNEY DOCKET NO.</b> 1111
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## APPLICANTS

James F. McGuckin JR., Radnor, PA;  
 Paul Tashjian, King of Prussia, PA;  
 Peter W.J. Hinchliffe, Downingtown, PA;

## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/326,905 10/03/2001  
 and is a CIP of 10/025,505 12/19/2001  
 and is a CIP of 10/025,506 12/19/2001 PAT 6,814,718  
 which claims benefit of 60/260,592 01/09/2001

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 02/27/2002

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> PA	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 19	<b>INDEPENDENT CLAIMS</b> 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

## ADDRESS

Neil D. Gershon  
 Chief Patent Counsel  
 Rex Medical  
 1011 High Rd.  
 Stamford, CT 06905

## TITLE

Peritoneal dialysis catheter and insertion method

<b>FILING FEE RECEIVED</b> 454	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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